

09/763345

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SA	65966 4/8/0	3-26-01

INDEX OF CLAIMS

✓ ..... N ..... Non-elected  
 = ..... Answered .....  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted 0 ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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